

Fill in this information to identify your case:

Debtor 1	Renee	Michelle	Wade
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Southern		District of Texas
Case number (if known)	25-32787-H5-7		

☒ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- ☒ No. Go to Part 2.
☐ Yes.

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

			Total claim
4.1	Barclays Bank Delaware	Last 4 digits of account number 7 5 9 6	\$1,097.00
Nonpriority Creditor's Name		When was the debt incurred? 5/1/2020	
Attn: Bankruptcy			
PO Box 8801		As of the date you file, the claim is: Check all that apply.	
Number	Street	<input type="checkbox"/> Contingent	
Wilmington, DE 19899-8801		<input type="checkbox"/> Unliquidated	
City	State	ZIP Code	<input type="checkbox"/> Disputed
Who incurred the debt? Check one.			
<input checked="" type="checkbox"/> Debtor 1 only			
<input type="checkbox"/> Debtor 2 only			
<input type="checkbox"/> Debtor 1 and Debtor 2 only			
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Type of NONPRIORITY unsecured claim:			
<input type="checkbox"/> Student loans			
<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
<input checked="" type="checkbox"/> Other. Specify CreditCard			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			

Debtor 1

Renee**Michelle****Wade**Case number (if known) **25-32787-H5-7**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.2	Card Assets Llc	Last 4 digits of account number <u>7 6 5 7</u>	\$7,083.00
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Nonpriority Creditor's Name

600 W Main

Number Street

Jacksonville, AR 72076

City State ZIP Code

When was the debt incurred?

7/12/2006

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify CreditCard

Is the claim subject to offset?

☒ No☐ Yes

4.3	Costco Citi Card	Last 4 digits of account number <u>0 4 5 0</u>	\$616.00
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Nonpriority Creditor's Name

Attn: Bankruptcy**PO Box 6500**

Number Street

Sioux Falls, SD 57117

City State ZIP Code

When was the debt incurred?

3/1/2015

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify CreditCard

Is the claim subject to offset?

☒ No☐ Yes

Debtor 1

Renee**Michelle****Wade**Case number (if known) **25-32787-H5-7**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.4	Discover Financial	Last 4 digits of account number 5 0 5 3	\$4,485.00
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Nonpriority Creditor's Name

Bankruptcy

When was the debt incurred?

11/1/2007**Po Box 3025**

As of the date you file, the claim is: Check all that apply.

Number Street

☐ Contingent**New Albany, OH 43054-3025**☐ Unliquidated

City State ZIP Code

☐ Disputed

Who incurred the debt? Check one.

Type of NONPRIORITY unsecured claim:

☒ Debtor 1 only☐ Student loans☐ Debtor 2 only☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debtor 1 and Debtor 2 only☐ Debts to pension or profit-sharing plans, and other similar debts☐ At least one of the debtors and another☒ Other. Specify **CreditCard**☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

4.5	DSRM Nat Bank/Valero	Last 4 digits of account number 0 0 0 0	\$432.00
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Nonpriority Creditor's Name

Attn: Bankruptcy

When was the debt incurred?

8/1/1996**Po Box 696000**

As of the date you file, the claim is: Check all that apply.

Number Street

☐ Contingent**San Antonio, TX 78269-6000**☐ Unliquidated

City State ZIP Code

☐ Disputed

Who incurred the debt? Check one.

Type of NONPRIORITY unsecured claim:

☒ Debtor 1 only☐ Student loans☐ Debtor 2 only☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debtor 1 and Debtor 2 only☐ Debts to pension or profit-sharing plans, and other similar debts☐ At least one of the debtors and another☒ Other. Specify **ChargeAccount**☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Debtor 1

Renee**Michelle****Wade**Case number (if known) **25-32787-H5-7**

First Name

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Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.6	Elan Fin Svcs/fidelity	Last 4 digits of account number	<u>2 2 2 7</u>	\$5,459.00
Nonpriority Creditor's Name		When was the debt incurred? <u>4/1/2019</u>		
Cb Disputes				
Number Street		As of the date you file, the claim is: Check all that apply.		
Saint Louis, MO 63166		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
City State ZIP Code				
Who incurred the debt? Check one.		Type of NONPRIORITY unsecured claim:		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>		
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.7	Megan Rapp, Seiler Rapp & Guerra, LLC	Last 4 digits of account number	<u>3 4 7 2</u>	\$17,682.72
Nonpriority Creditor's Name		When was the debt incurred? _____		
2700 Research Forest Dr				
Number Street		As of the date you file, the claim is: Check all that apply.		
Spring, TX 77381-4252		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
City State ZIP Code				
Who incurred the debt? Check one.		Type of NONPRIORITY unsecured claim:		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collecting For Gulf Coast Pros, LLC</u>		
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1

Renee**Michelle****Wade**Case number (if known) **25-32787-H5-7**

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Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.8	Midland Credit Mgmt	Last 4 digits of account number	<u>3</u> <u>9</u> <u>6</u> <u>6</u>	\$6,603.00
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Nonpriority Creditor's Name

Attn: Bankruptcy**PO Box 939069**

Number Street

San Diego, CA 92193

City State ZIP Code

When was the debt incurred?

12/1/2023

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify FactoringCompanyAccount

Is the claim subject to offset?

☒ No☐ Yes

4.9	Midland Credit Mgmt/Walmart	Last 4 digits of account number	_ _ _ _	\$8,580.00
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Nonpriority Creditor's Name

Attn: Bankruptcy**PO Box 939069**

Number Street

San Diego, CA 92193

City State ZIP Code

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Credit Card

Is the claim subject to offset?

☒ No☐ Yes

Debtor 1

Renee**Michelle****Wade**Case number (if known) **25-32787-H5-7**

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Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.10	Navient	Last 4 digits of account number	<u>0 1 1 7</u>	\$4,656.00
Nonpriority Creditor's Name		When was the debt incurred? <u>1/1/2017</u>		
Attn: Bankruptcy				
PO Box 9635		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent		
Wilkes Barre, PA 18773-9635		<input type="checkbox"/> Unliquidated		
City	State	ZIP Code	<input type="checkbox"/> Disputed	
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
4.11	Navient	Last 4 digits of account number	<u>1 2 1 1</u>	\$3,869.00
Nonpriority Creditor's Name		When was the debt incurred? <u>12/1/2014</u>		
Attn: Bankruptcy				
PO Box 9635		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent		
Wilkes Barre, PA 18773-9635		<input type="checkbox"/> Unliquidated		
City	State	ZIP Code	<input type="checkbox"/> Disputed	
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Debtor 1

Renee**Michelle****Wade**Case number (if known) **25-32787-H5-7**

First Name

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Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.12	Navient	Last 4 digits of account number	<u>0 1 1 7</u>	\$3,691.00
Nonpriority Creditor's Name		When was the debt incurred? <u>1/1/2017</u>		
Attn: Bankruptcy				
PO Box 9635		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent		
Wilkes Barre, PA 18773-9635		<input type="checkbox"/> Unliquidated		
City	State	ZIP Code	<input type="checkbox"/> Disputed	
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
4.13	Navient	Last 4 digits of account number	<u>1 2 1 1</u>	\$3,676.00
Nonpriority Creditor's Name		When was the debt incurred? <u>12/1/2014</u>		
Attn: Bankruptcy				
PO Box 9635		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent		
Wilkes Barre, PA 18773-9635		<input type="checkbox"/> Unliquidated		
City	State	ZIP Code	<input type="checkbox"/> Disputed	
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Debtor 1

Renee**Michelle****Wade**Case number (if known) **25-32787-H5-7**

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Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.14	Navient	Last 4 digits of account number	<u>0 5 0 2</u>	\$2,983.00
Nonpriority Creditor's Name		When was the debt incurred? <u>5/1/2014</u>		
Attn: Bankruptcy				
PO Box 9635		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent		
Wilkes Barre, PA 18773-9635		<input type="checkbox"/> Unliquidated		
City	State	ZIP Code	<input type="checkbox"/> Disputed	
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
4.15	Navient	Last 4 digits of account number	<u>0 6 0 9</u>	\$2,604.00
Nonpriority Creditor's Name		When was the debt incurred? <u>6/1/2016</u>		
Attn: Bankruptcy				
PO Box 9635		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent		
Wilkes Barre, PA 18773-9635		<input type="checkbox"/> Unliquidated		
City	State	ZIP Code	<input type="checkbox"/> Disputed	
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Debtor 1

Renee**Michelle****Wade**Case number (if known) **25-32787-H5-7**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.16	Navient	Last 4 digits of account number	<u>1</u> <u>2</u> <u>1</u> <u>7</u>	\$2,502.00
Nonpriority Creditor's Name		When was the debt incurred? <u>12/1/2017</u>		
Attn: Bankruptcy				
PO Box 9635		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent		
Wilkes Barre, PA 18773-9635		<input type="checkbox"/> Unliquidated		
City	State	ZIP Code	<input type="checkbox"/> Disputed	
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
4.17	Navient	Last 4 digits of account number	<u>1</u> <u>2</u> <u>1</u> <u>0</u>	\$2,500.00
Nonpriority Creditor's Name		When was the debt incurred? <u>12/1/2015</u>		
Attn: Bankruptcy				
PO Box 9635		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent		
Wilkes Barre, PA 18773-9635		<input type="checkbox"/> Unliquidated		
City	State	ZIP Code	<input type="checkbox"/> Disputed	
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Debtor 1

Renee**Michelle****Wade**Case number (if known) **25-32787-H5-7**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.18	Navient	Last 4 digits of account number	<u>1</u> <u>2</u> <u>1</u> <u>7</u>	\$1,844.00
Nonpriority Creditor's Name		When was the debt incurred? <u>12/1/2017</u>		
Attn: Bankruptcy				
PO Box 9635		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent		
Wilkes Barre, PA 18773-9635		<input type="checkbox"/> Unliquidated		
City	State	ZIP Code	<input type="checkbox"/> Disputed	
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
4.19	Navient	Last 4 digits of account number	<u>0</u> <u>6</u> <u>0</u> <u>9</u>	\$1,822.00
Nonpriority Creditor's Name		When was the debt incurred? <u>6/1/2016</u>		
Attn: Bankruptcy				
PO Box 9635		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent		
Wilkes Barre, PA 18773-9635		<input type="checkbox"/> Unliquidated		
City	State	ZIP Code	<input type="checkbox"/> Disputed	
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Debtor 1

Renee**Michelle****Wade**Case number (if known) **25-32787-H5-7**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.20	Navient	Last 4 digits of account number	<u>1</u> <u>2</u> <u>1</u> <u>0</u>	\$1,780.00
	Nonpriority Creditor's Name	When was the debt incurred? <u>12/1/2015</u>		
	Attn: Bankruptcy			
	PO Box 9635	As of the date you file, the claim is: Check all that apply.		
	Number Street	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Wilkes Barre, PA 18773-9635	Type of NONPRIORITY unsecured claim:		
	City State ZIP Code	<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		
	Who incurred the debt? Check one.			
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.21	Navient	Last 4 digits of account number	<u>0</u> <u>5</u> <u>0</u> <u>2</u>	\$1,472.00
	Nonpriority Creditor's Name	When was the debt incurred? <u>5/1/2014</u>		
	Attn: Bankruptcy			
	PO Box 9635	As of the date you file, the claim is: Check all that apply.		
	Number Street	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Wilkes Barre, PA 18773-9635	Type of NONPRIORITY unsecured claim:		
	City State ZIP Code	<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		
	Who incurred the debt? Check one.			
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

Renee**Michelle****Wade**Case number (if known) **25-32787-H5-7**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.22	Navient	Last 4 digits of account number	<u>0</u> <u>6</u> <u>1</u> <u>2</u>	\$831.00
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Nonpriority Creditor's Name

Attn: Bankruptcy**PO Box 9635**

Number Street

Wilkes Barre, PA 18773-9635

City State ZIP Code

When was the debt incurred?

6/1/2014

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☒ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify _____

Is the claim subject to offset?

☒ No☐ Yes

4.23	PNC Financial	Last 4 digits of account number	<u>3</u> <u>5</u> <u>9</u> <u>9</u>	\$7,619.00
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Nonpriority Creditor's Name

Bankruptcy**300 5th Ave**

Number Street

Pittsburgh, PA 15222-2401

City State ZIP Code

When was the debt incurred?

2/1/2011

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify CreditCard

Is the claim subject to offset?

☒ No☐ Yes

Debtor 1

Renee**Michelle****Wade**Case number (if known) **25-32787-H5-7**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.24	Quest Diagnostics	Last 4 digits of account number 8 0 8 2	\$169.43
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Nonpriority Creditor's Name

Po Box 825

Number Street

South Windsor, CT 06074-0825

City State ZIP Code

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Medical Bill**

Is the claim subject to offset?

☒ No☐ Yes

4.25	Syncb/Care Credit	Last 4 digits of account number 6 2 7 2	\$150.00
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Nonpriority Creditor's Name

Attn: Bankruptcy**PO Box 965060**

Number Street

Orlando, FL 32896

City State ZIP Code

When was the debt incurred?

8/1/2011

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **ChargeAccount**

Is the claim subject to offset?

☒ No☐ Yes

Debtor 1

Renee**Michelle****Wade**Case number (if known) **25-32787-H5-7**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.26	Synchrony Bank/Care Credit	Last 4 digits of account number <u>8 4 3 8</u>	\$8,982.00
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Nonpriority Creditor's Name

Attn: Bankruptcy**PO Box 965060**

Number Street

Orlando, FL 32896

City State ZIP Code

When was the debt incurred? 1/1/2009

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify ChargeAccount

Is the claim subject to offset?

☒ No☐ Yes

4.27	Synchrony Bank/Lowes	Last 4 digits of account number <u>0 8 0 2</u>	\$4,062.00
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Nonpriority Creditor's Name

Attn: Bankruptcy**PO Box 965060**

Number Street

Orlando, FL 32896

City State ZIP Code

When was the debt incurred? 1/1/2023

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify ChargeAccount

Is the claim subject to offset?

☒ No☐ Yes

Debtor 1

Renee**Michelle****Wade**Case number (if known) **25-32787-H5-7**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.28	Synchrony Bank/Sams Club	Last 4 digits of account number	<u>8 8 4 5</u>	\$1,092.00
Nonpriority Creditor's Name		When was the debt incurred?		
Attn: Bankruptcy		<u>12/1/2010</u>		
PO Box 965060		As of the date you file, the claim is: Check all that apply.		
Number Street		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Orlando, FL 32896		Type of NONPRIORITY unsecured claim:		
City State ZIP Code		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>		
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.29	Synchrony/PayPal Credit	Last 4 digits of account number	<u>9 1 7 0</u>	\$1,789.00
Nonpriority Creditor's Name		When was the debt incurred?		
Attn: Bankruptcy		<u>7/1/2009</u>		
PO Box 965064		As of the date you file, the claim is: Check all that apply.		
Number Street		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Orlando, FL 32896-5064		Type of NONPRIORITY unsecured claim:		
City State ZIP Code		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>		
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1

Renee**Michelle****Wade**Case number (if known) **25-32787-H5-7**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.30	Urgent Care for Kids	Last 4 digits of account number N 0 0 1	\$25.00
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Nonpriority Creditor's Name

1701 River Run Ste 302

Number

Street

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Fort Worth, TX 76107-6547**

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Medical Bill**

Is the claim subject to offset?

☒ No☐ Yes

4.31	USAA Federal Savings Bank	Last 4 digits of account number 3 6 0 9	\$4,143.00
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Nonpriority Creditor's Name

Attn: Bankruptcy**9800 Fredericksburg Rd**

Number

Street

When was the debt incurred?

5/1/2014

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**San Antonio, TX 78288**

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **CreditCard**

Is the claim subject to offset?

☒ No☐ Yes

Debtor 1

Renee**Michelle****Wade**Case number (if known) **25-32787-H5-7**

First Name

Middle Name

Last Name

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

1.**Rausch Sturm LLP**

On which entry in Part 1 or Part 2 did you list the original creditor?

Name

Line **4.4** of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims**15660 Dallas Pkwy Ste 350**

Number Street

Last 4 digits of account number _____

Dallas, TX 75248-3344

City

State

ZIP Code

Debtor 1

Renee**Michelle****Wade**Case number (if known) **25-32787-H5-7**

First Name

Middle Name

Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim	
Total claims from Part 1	6a. Domestic support obligations	6a.	\$0.00
	6b. Taxes and certain other debts you owe the government	6b.	\$0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. +	\$0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$0.00
		Total claim	
Total claims from Part 2	6f. Student loans	6f.	\$34,230.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. +	\$80,069.15
	6j. Total. Add lines 6f through 6i.	6j.	\$114,299.15

Fill in this information to identify your case:

Debtor 1	<u>Renee</u>	<u>Michelle</u>	<u>Wade</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Southern District of Texas</u>		
Case number (if known)	<u>25-32787-H5-7</u>		

☒ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?



No

☐ Yes. Name of person _____ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X

/s/ Renee Michelle Wade

Renee Michelle Wade, Debtor 1

Date 07/09/2025

MM/ DD/ YYYY